



# TRANSMITTAL FORM

(be used for all correspondence after initial filing)

Total Number of Pages in This Submission

5

Application Number

10/826,919

Filing Date

April 16, 2004

First Named Inventor

Alexander Deiters

Art Unit

1656

Attorney Docket Number

54-000250US

## ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> PTO-1449 Form	<input type="checkbox"/> Executed Declaration
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Cited References	<input type="checkbox"/> Power of Attorney
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Copy of PCT Search Report	<input type="checkbox"/> Certificate of Assignee
<input type="checkbox"/> Amendment and Request for Reconsideration	<input type="checkbox"/> Copy of EP Search Report	<input type="checkbox"/> Copy of Executed Assignment (Not for Recordation)
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> Sequence Listing Statement
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Request for Corrected Filing Receipt	<input type="checkbox"/> Sequence Listing Paper Form
<input checked="" type="checkbox"/> Receipt Acknowledgement Postcard	<input type="checkbox"/> Copy of Filing Receipt – marked-up	<input type="checkbox"/> Drawings
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Replacement/Supplemental Application Data Entry Form	<input type="checkbox"/> Letter to Official Draftsperson
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input checked="" type="checkbox"/> Communication to Examiner	<input type="checkbox"/> Replacement Specification – Marked-Up
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input checked="" type="checkbox"/> Copy of 1449 form submitted on August 3, 2009	<input type="checkbox"/> Replacement Specification – Clean Copy
<input type="checkbox"/> Copy of Notice to File Missing Parts		
<input checked="" type="checkbox"/> Interview Summary		
<input type="checkbox"/> Preliminary Amendment		
<input type="checkbox"/> Request for Continued Examination (RCE)		
<input type="checkbox"/> Change Entity Status		

### Authorization to Charge Deposit Account

Please charge Deposit Account No. 50-0893 for any additional fees associated with this paper or during the pendency of this application, including any extensions of time for consideration of the documents enclosed.

### Remarks

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Quine Intellectual Property Law Group P.C.		
Printed name	Christina Onufryk	Reg. No.	59,842
Signature			
Date	November 15, 2010		

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Deborah Barragan		
Signature		Date	November 15, 2010